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THESIS

BEGINNINGS OF MALADJUSTMENT AND DELINQUENCY: A STUDY OF THE METHODS OF DETECTION USED IN THIRTEEN LARGE CITIES

Submitted by

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CHAPTER I

I. INTRODUCTION

The classroom teacher, more than any other person, is in a position to detect lack of adjustment in the school child. When the teacher is ignorant of the meaning of these symptoms of behavior, it remains for some other agency to discover the maladjustment. By that time the child may be a clinical or juvenile court case. Therefore, it is imperative that this discovery be made as early as possible. The earlier the maladjustment is discovered, the greater are the chances that treatment will be effective.

Recent studies seem to show that it is entirely possible to detect deviations very early, if the adults who are associated with these boys and girls are alert to the symptoms and their meaning.

Since most children are in school for at least eight years, from the ages of six to fourteen, for the greater part of their waking hours, it would seem that the school is the logical place for these abnormalities to be discovered.

II. THE PROBLEM

Statement of the Problem. It is the purpose of this study to attempt to show (1) that there are some definite symptoms that usually precede delinquency; (2) that the classroom teacher and others associated with the child

in school should be sensitized to the early indications of maladjustment, so that treatment may be initiated at that period, thus saving many children from more serious involvements and actual delinquency; (3) what some of the large cities in the United States are doing to pick up the beginnings of maladjustment.

III. IMPORTANCE OF THE STUDY

For the past one hundred years a great deal has been said and written about the increase in the amount of juvenile delinquency. An article in the Atlantic Monthly[1/] for December 1926, states that periodically since 1840, alarming statements have been made concerning juvenile delinquency. In 1925, Haggerty[2/] stated that there were more children with behavior problems in the public schools than most of us cared to admit. He also went on to state that there was a growing belief that we must take seriously these early behavior disorders, if we are to ". . . prevent the dreadful toll which crime and insanity in their more serious forms levy upon our on-coming generation." In 1934, Williams[3/] emphasized the urgency of discovering these disorders at the earliest possible moment. Even at that

1/ A. B. Hulbert, "The Habit of Going to the Devil" Atlantic Monthly, 138:806-6, December 1926.

2/ M. E. Haggerty, "Incidence of Undesirable Behavior in Public School Children" Journal of Educational Research, 12:103, September 1925.

3/ Herbert D. Williams, "A Survey of Predelinquent School Children of Ten Midwestern Cities", Journal of Educational Sociology, 7:365, February 1934.

time Williams believed that there were definite symptoms which were indicative of maladjustment, especially when found in company with other unfavorable conditions. By 1945, Spence[1/] stated that the school's greatest contribution is in the detection of vulnerables and these vulnerables are frequently those children who do not fit the typical school pattern. In writing of the classroom teacher's part in relation to delinquency, Keener[2/] states that

> Treatment is necessary, but prevention is both more economical and more effective.

Gane,[3/] Executive Secretary of the Children's Aid Society and the Society for the Prevention of Cruelty to Children, Buffalo, New York, wrote that the most effective program for the prevention of delinquency is the one which can be set up by the schools, where the child's difficulties are observed and recognized for the first time by personnel trained to understand him.

1/ Ralph B. Spence, "New York State's Program for Preventing Delinquency," Journal of Educational Sociology, 18:439, March 1945.

2/ Edward B. Keener, "Classroom Teacher and Juvenile Delinquency," Elementary School Journal, 40:55, Sept.1939.

3/ E. Marguerite Gane, "Social Agencies Stand Ready to Help," New York State Education, 31:179, December 1943.

Hill[1/] again points the problem when he asks, "Have the schools done all they could do in preventing and correcting anti-social tendencies in young children and adolescents?"

IV. DEFINITIONS OF TERMS USED

Behavior Problem. Whenever behavior disturbs the ordinary routine of the classroom activity, a problem is created.

Maladjustment. In this study, maladjustment will be used to indicate a lack of harmony with the environment, caused by the child's failure to reach a satisfactory adjustment between his desires and his conditions of life.

Juvenile Delinquent. This is a legal term applied only to those youths who have violated a law or ordinance and been brought into some type of court.

V. ORGANIZATION OF THE STUDY

In the following chapter, the pertinent literature in the field will be reviewed to show the trend of thinking among educators and social workers in regard to behavior problems and delinquency, and to show that it is generally accepted that there are definite symptoms which should be heeded.

Correspondence and reports received by the writer

1/ George E. Hill, "Fewer Schools--More Jails," Education 55:558, May 1935.

from school systems in twelve cities will be reviewed and summarized to see what agreement is evident in their preventive programs as they have been set up. In addition to reviewing the findings, an attempt will be made to show that the whole program, in the last analysis, depends largely on the classroom teacher, who must be sensitized to the urgency of the problem.

It is the contention of the writer that, first, the teacher must be interested in boys and girls as individuals and human beings, and then, understand their normal development and behavior before she will be able to detect deviations. An open-minded attitude and willingness to co-operate are essential. There is nothing mysterious or psychic about discovering the beginnings of maladjustment.

The studies, which will be reviewed in the following chapter, show the great concern with which educators have been viewing the problem of maladjustment and delinquency, but they also seem to show that the greatest single agency in prevention is the school.

CHAPTER II

I. RELATED READINGS

As stated in the previous chapter, the writer has felt that the beginning of maladjustment and delinquency could and should be detected long before it reaches the stage that could be called delinquency. While discussing the subject with a superintendent of schools in a city in Oregon, relative to taking this year for study, he stated that his observations had led him to believe that delinquent tendencies could be detected even in the first grade in many cases. There must be some pattern of traits that begins to form and is evident to anyone looking for it.

This idea seems to have been confirmed by many studies in the field. As early as 1934, Williams[1/] stated that

> Since all children attend school at least in the early grades, the school would seem to be the logical place to discover the predelinquent while his delinquent tendencies are still in the incipient stages of development. Previous studies have convinced the writer that this is possible.

The responsibility of the school is emphasized in the statement contained in the United States Office of

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1/ Herbert D. Williams, op. cit. p. 365

Education[1] publication, Education for Victory, which says that within the possibilities of every school is the early discovery of tendencies which, if not remedied, lead to delinquency.

The high rate of delinquency in the intermediate grades and junior high school leads one to believe that these children have been deviating from the normal pattern of behavior for some time. Snyder[2] places the peak of all behavior problems in the sixth grade.

In St. Paul, Minnesota[3] it was found that as the result of a planned program carried on in one district of the city, it was possible to recognize deviations at an earlier age. In 1937, when the study began, the median age for referrals was thirteen years, while five years

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1/ U. S. Office of Education, "Schools Called upon to Assume Larger Shares in Prevention of Delinquency," Education for Victory, 1:25 March 15, 1943.

2/ Louise May Snyder, "The Problem Child in the Jersey City Elementary Schools," Journal of Educational Sociology, 7:350 Pt. 1, February 1934.

3/ Katherine Lenroot, "Delinquency Prevention Through School and Social Agency Co-ordination," Educational Forum, November 1943 (Reprint for U. S. Children's Bureau) P. 11

later in 1942, the median age had dropped to ten years.

II. THE TEACHER AS A FACTOR IN MALADJUSTMENT

Weston[1] states that it is a well-known fact that some classroom teachers recognize distress signals more quickly and clearly than others, but that

> . . . in that millennium when all of us are interested and trained to understand emotional problems, we shall all do a better job at this early recognition and acceptance of them.

Wickman[2] suggests that teachers should have a more general knowledge of what constitutes normal child behavior. Many so-called problem children are really misunderstood, but very normal children. On the other hand, many types of behavior classed as normal by the classroom teacher are not normal even though they may be common. Although the school staffs are trained to handle children, they frequently need a clearer understanding of behavior problem is the belief of Spence.[3] This belief is also expressed by the mental hygienist Fenton[4] when he says,

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1/ Helen E. Weston, "The School's Role in Preventing Delinquency," New York State Education. 31:177 Dec. 1943

2/ E. Koster Wickman, Children's Behavior and Teachers' Attitudes, Commonwealth Fund, New York, 1928 p. 182

3/ Ralph B. Spence, op. cit. p. 439

4/ Norman Fenton, Mental Hygiene and School Practice, Stanford University Press, Stanford University, California, 1943 p. 108

> For the teacher to really understand the pupil, she must know about his background, his earlier human relationships, especially his parents, brothers, sisters, servants and others; how he was treated by them, his feeling for them, their attitudes, interest, affection; his later relationships with neighbors and playmates.

During the period when character education courses were common in Teachers' Colleges, Peyser[1/] wrote that teachers and supervisors must comprehend the psychology of character formation. They should understand the "factors that enter into the causation of normal personality" and those that lead to conflict and maladjustment.

Haggerty[2/] believes that,

> . . . the exciting cause for undesirable behavior on the part of children is sometimes the teacher herself who falls short of complete adaptation to the school situation.

We find this opinion as to the role of the school in causing maladjustments also expressed in this fashion by Kvaraceus,[3/]

> So long as teachers will continue to concern themselves solely with academic growth and to disregard the importance of fundamental changes in human behavior, we may expect that they will persist in failing and frustrating one pupil after another.

1/ Nathan Peyser, "Public Schools and the Problem of Crime Prevention," Journal of Educational Sociology 6:134 November 1932

2/ M. E. Haggerty, op. cit. p. 105

3/ William C. Kvaraceus, Juvenile Delinquency and the School, World Book Co., Yonkers-on-Hudson, New York, 1945, p. 144

These authors have put forth serious indictments against the classroom teachers. It is interesting to note that Haggerty[1] made his statement over twenty years ago. His was as the "voice of one crying in the wilderness" at that time. In the recent literature, we find the same idea expressed over and over again.

III. TRAITS COMMON TO DELINQUENTS

One phase of the study by Wickman[2] attempted to discover what traits made a child's behavior distressing to his teachers. Whispering was placed first by a large majority of the teachers with all forms of aggressive behavior more frequently mentioned than the withdrawing types. Snyder[3] found that annoying other pupils was listed most frequently by teachers as a fault of their pupils, being mentioned 150 times; inattention was second, mentioned 100 times; while sensitiveness was mentioned only twice and fearfulness only once.

In the light of the many studies that have been made, it seems that authorities are beginning to agree that there are some traits or characteristics common to most delinquents. In most of these studies, aggressive

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1/ M. E. Haggerty, op. cit. p. 105

2/ E. K. Wickman, op. cit. p. 68-70

3/ Louise M. Snyder, op. cit. p. 344

behavior of all types is mentioned most frequently as a cause of behavior difficulties. Some of the most common forms of aggressive behavior are fighting, bullying, meddling, acts against property, insolence, and defiance of authority.

Elliott[1/] is of the opinion that a withdrawal from activities may be more serious than overt behavior. Some of the most common forms of regressive behavior are: day dreaming, timidity, shyness, bed wetting, extremely quiet, masturbation, feeling inferior, nervousness, and listlessness.

Under the heading of "Social Trait Differences" Fisher[2/] lists: disinterested in school work, cheating, unnecessary tardiness, lying, defiance of authority, marked over-activity, unpopularity with other children, temper outbursts, bullying, speech difficulties, imaginative lying, sex offenses, stealing and truancy. She also states that the greatest difference between problem and non-problem children is in the item "unpopularity with other children".

1/ Eugene B. Elliott, Helping the Exceptional Child in the Regular Classroom, Bulletin #315, Department of Public Instruction in Michigan p. 47

2/ Mildred L. Fisher, "Measured Differences between Problem and Non-Problem Children in the Public School System," Journal of Educational Sociology, 7:358-359 February 1934

IV. PREDICTION OF DELINQUENCY

Haggerty[1] found the following factors closely allied in problem children: (1) over age and retarded, (2) low intelligence, (3) undesirable behavior. Very nearly the same traits were discovered by Kvaraceus[2] in his study of delinquents in Passaic, New Jersey. He found that school retardation, low intelligence, truancy and frequent tardiness, expressed dislike for school, unsatisfactory social adjustment, and low socio-economic home conditions were common to a great proportion of the delinquents.

Dr. Eleanor Glueck[3] of Harvard University in her lecture stated that she and Dr. Sheldon Glueck are now attempting to isolate factors that are common to delinquents and that might be used to predict delinquency. Their study is not complete, but Dr. Eleanor Glueck believes that school retardation, low intelligence, truancy, and tardiness, especially when in conjunction with low socio-economic background, make a fairly good index for predicting future delinquency.

1/ M. E. Haggerty, op. cit. p. 116

2/ William C. Kvaraceus, op. cit. pp. 155-156

3/ Eleanor T. Glueck, Harvard University Lecture, "Delinquency and Social Upheavals in Adolescence", delivered before class, Bases of Behavior in Boston University, December 2, 1946

V. SYMPTOMS OF MALADJUSTMENT

A report of the Massachusetts Child Council[1/] gives as classroom evidences of maladjustment:

1. Repeated failure in studies
2. Offenses against school discipline
   a. Truancy
   b. Tardiness
   c. Insolence
   d. Petty stealing
   e. Cheating
   f. Lying
3. Group misfit
   a. Shyness
   b. Solitariness
   c. Over-aggression
   d. Hyperactivity

In the Bulletin[2/] Crime Prevention Through Education, are given these traits suggestive of behavior-problem children: apathy, sensitiveness, seclusiveness, tendency to

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1/ Massachusetts Child Council, Juvenile Delinquency in Massachusetts a Public Responsibility, Boston, 1939, pp. 139-140

2/ National Education Association Research Bulletin, Crime Prevention Through Education, 10:132 September 1932

cry easily, moodiness, unpopularity and inability to get along, and cruelty to animals and other persons. These are listed in addition to the other traits that have been given from other sources.

In a recent article, Roland[1/] makes the following statement:

> One child may be withdrawn, inhibited and unobtrusive; another defiant, aggressive and socially unacceptable. Each is probably emotionally sick to some degree or other and at odds with his environment, including the people in it. The school is midway, being part of his every-day living; yet is only secondary in importance, for, problems which seem centered in the classroom may stem from the home, the parent-child relationship. Rebellion against authority at home may be unconsciously transferred to the teacher at school.

She states further that some problems arise because the child feels that he is not like other children. This may become a problem, if the child cannot accept this difference and learn to live with it. The child who is tallest, fattest, the one who wears glasses, or has red hair, or is lame, or hard of hearing, unable to read, or whose parents speak no English, may never tell why he behaves as he does. He may not really know. He may become retiring and withdrawn, or he may over-compensate by being aggressive in self-defense, or from fear of his own inferiority, he may develop other signs of maladjustment.

1/ Mary C. Roland, "Help for Problem Children", Nations Schools 36:25-27, November 1945

A further list of symptoms of maladjustment and possibly of predelinquency is given by Williams[1] as follows:

> Constantly annoys children near by, misconduct in school, disrespect for authority, quarrels with other children, indifferent to rights and opinions of others, lacks good sportsmanship, lies, inability to appreciate consequences, easily led, uncleanliness in body and clothes, tries to dominate other children, associates with bad companions, abnormal desire for attention, over age for grade, inadequate parental supervision, poverty, ignorance of parents, irregular attendance.

He also included on the physical side, undernourished, defective teeth, unduly awkward, defective vision, or defective speech.

Fenton[2] lists symptoms of maladjustment from the point of view of the mental hygienist, so we have several additions to the already long list. He lists the symptoms according to types and also as to grade and age levels.

A. Nervous habits

1. Preschool and elementary

Worry, Speech retardation, fears, temper tantrums, over-dependency, bashfulness, negativism, inuresis, nail-biting, thumb-sucking. (Average of three symptoms per child.)

2. Adolescent

Opinionated, disorderly, easily annoyed, impudent, awkward, chronic fatigue, display of

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1/ Herbert D. Williams, op. cit. p. 369

2/ Norman Fenton, op. cit. pp. 154-155

aggression, and temper.

B. Marked insubordination

Constant disagreeableness, serious aggressive or destructive behavior, frequent truancy, extreme seclusiveness, repeated stealing, running away from home, reading retardation, speech defect, sexual maladjustment.

C. Dangerous aggressiveness or destructiveness, juvenile delinquency, emotional instability, actual mental or nervous illness, serious reading disability (non-reader), serious speech disability.

Hewitt and Jenkins[1/] list the following as situational items which are often present in the background of the maladjusted and delinquent child.

A. Vicious home conditions

B. Immoral home conditions

C. Discord between parents

D. Brother in penal detention

E. Feebleminded sibling

They also list the characteristics of delinquents according to three syndromes;

A. Unsocial

1/ Lester E. Hewitt and Richard L. Jenkins, Fundamental Patterns of Maladjustment, the Dynamics of Their Origin, printed by authority of the State of Illinois, 1946

1. Assaultive tendencies
2. Initiatory fighting
3. Cruelty
4. Open defiance to authority
5. Malicious mischief
6. Inadequate guilt feeling
7. Refusal to accept blame
8. Can't get along with others
9. Boastful
10. Selfish
11. Deceitful
12. Suspicious
13. Overtly seeks revenge
14. Obscene, profane language
15. Petty thieving
16. Overt interest in sex
17. Moods of hatred and self-pity

B. Socialized delinquency behavior

1. Undesirable companions
2. Gang activities
3. Co-operative stealing
4. Furtive stealing
5. Habitual school truancy
6. Running away from home over night
7. Staying out late nights

C. Over-inhibited behavior

1. Seclusiveness
2. Shyness
3. Apathy
4. Worry
5. Sensitiveness
6. Submissiveness
7. Day dreaming
8. Over-dependence
9. Cries easily
10. Fears
11. Feels inferior
12. Compulsions
13. Indecisiveness
14. Easily depressed
15. Anxiety
16. Anxiety attacks, terror dreams, sleep disturbances

Hill[1/] studied the records of adult offenders and found certain factors common to their early history. Almost invariably their school histories showed retardation, left school earlier, failure, non-participation, and other behavior difficulties.

1/ George E. Hill, "Fewer Schools--More Jails", Education, 55:528, May 1935

Hollingworth[1/] found that even the very gifted children were reported for behavior difficulties, though not in such large numbers, but principally because of restlessness, lack of interest, rebellion against authority, and what she terms a "condition of negative suggestibility".

The study of Massachusetts schools conducted by the Massachusetts Child Council[2/] showed about the same classroom evidences of maladjustment, namely: (1) repeated failure in studies; (2) offenses against school discipline, truancy, tardiness, insolence, petty stealing, cheating and lying; (3) group misfit--shyness, solitariness, over-aggression and hyperactive. This study also considered the type of home from which the juvenile offenders came and found again, some common factors. It must be remembered that any one of these factors does not cause delinquency, but when coupled with other predisposing factors, may be an indication and, as such, should be studied.

1/ Leta S. Hollingworth, Children Above 180 I. Q., World Book Co., Yonkers-on-Hudson, N. Y.,1942 p.254

2/ Massachusetts Child Council Juvenile Delinquency in Massachusetts, a Public Responsibility, Boston, 1939 p. 117

In the family background of delinquents, these factors were found to be common:

1. Broken or poorly supervised home
2. Known to one or more social agencies
3. Foreign-born parents
4. Poor neighborhood influences
5. Economic conditions, marginal or dependent
6. Poor moral standards
7. Poor parental discipline
8. Poor physical home
9. Previous court record in family
10. One or both parents illiterate
11. Six or more children
12. Mental defect or disease

Common personal characteristics were:

1. Lack of constructive leisure interests
2. Harmful companions
3. Native-born
4. Began working when juvenile--street trade
5. Bad habits
6. Never a member of a crowd or gang
7. Larceny and burglary are predominant offenses
8. Truant
9. Two or more years retarded or in a special class

10. Dull border-line defective

11. Mental distortion

12. Previous foster care

In studying the case histories of delinquents who had made violent and dangerous attacks, Topping[1/] found these characteristics making a frequently repeated pattern:

1. Early rejection by parents

2. Evident sense of "nobody cares"

3. Masked, but acute, desire for acceptance and affection

4. Pronounced ambivalence

5. Aggressive speech with much talk of killing

6. A sense of the pressure of life being too great

7. Easy resort to dangerous weapons

8. Indifference to consequences, even death as a penalty

9. Lack of humor

10. Lack of insight

11. Frequently over-pronounced sex drive

So far this all adds up to an appalling array of symptoms. This does not include some of the longer lists

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1/ Ruth Topping, "Case Studies of Aggressive Delinquents" American Journal of Orthopsychiatry, 11:485-492 1941

of which Wickman's[1] is probably the best known. This list was not included because it was made up of traits that annoyed teachers, but not the traits that were found to be most indicative of maladjustment. The list of behavior problems given by the mental hygienists in Wickman's[2] study coincides very closely with traits listed in this paper.

VI. TEACHERS' ATTITUDES

Most of the studies conducted, so far, in regard to the classroom teacher's attitude toward behavior problems and what they do about them, have not been very flattering to the teachers. Snyder[3] found in a study of problem children, that the teachers quite generally agreed that

> Problems were most commonly dealt with by scolding, counseling, or punishment. A few specified clinical or scientific study of the problem.

Suggestions as to the needs of the child were largely disciplinary, such as "should be made to realize that instant obedience is necessary," or "should be inculcated with a fear of breaking school regulations." It was

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1/ E. K. Wickman, op. cit. pp. 31-32 and 68-72

2/ E. K. Wickman, ibid. p. 127

3/ Louis May Snyder, op. cit. pp. 349-350

interesting to note that the teachers who were rated as above average or superior were the only ones who were not entirely satisfied with the handling of the problems.

It becomes evident in the light of previous studies that the program of prevention and early detection will have to be brought to the classroom teacher in a more forceful manner, if her interest and co-operation are to be enlisted. Again referring to Wickman's[1/] study, he says that by reason of an adult's superior knowledge, he should be able to change his behavior more readily than a child. He believes that the reason adults refuse to change their ideas about discipline is that it would amount to a confession of misbehavior on the part of the adult. This is more marked on the part of the teacher than the parent because with the teacher, her professional pride is involved, thus re-educating the adult meets an obstacle at the very outset.

Another factor to be considered is the emotional adjustment of the adult. Has the adult achieved personal satisfactions in life, satisfactory social relationships with others, did he learn to accept authority and has he made a satisfactory personal adjustment to love and sex life? If the teacher is still having difficulties in adjusting to principals, supervisors, administrators and

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1/ E. K. Wickman, op. cit. pp. 176-177

other teachers, the issue of authority becomes a problem between the teacher and the pupil.

Wickman[1/] suggests that the most profitable project would be to train student teachers in the study and treatment of behavior problems. Experienced teachers who have established a reputation as "good disciplinarians" usually show an emotional resistance to adopting a new viewpoint in regard to handling discipline problems. Wickman[2/] believes that

> In the active social sense, there is no behavior problem unless someone reacts to it as such. Any form of conduct may become a problem, if it is regarded and treated as undesirable behavior by the social group in which the individual lives.

Fenton[3/] agrees with this, when he says that

> The definition of a behavior problem is in reference to the particular neighborhood, particular classroom and teacher and particular home and parent.

If this is true, then the classroom teacher's role becomes most important in reference to the child's school adjustment. The mental hygienists have for years been deploring the fact that so many teachers are emotionally unstable, neurotic, and,in some instances, psychotic. Out of the total number of teachers, this number is comparatively small, but there is no way of

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1/ E. K. Wickman, op. cit. p. 184

2/ E. K. Wickman, ibid. p. 3

3/ Norman Fenton, op. cit. p. 144

estimating the damage that these few teachers have done to the pupils who have had the misfortune to come in contact with them. Some failure, retardation, truancy, and emotional inbalance have no doubt resulted from these contacts. The teacher who has lost control of her own emotions cannot be expected to aid a child in gaining control of his emotions.

Fenton[1/] stated further that,

> The secure teacher is able to consider the reason for the child's misbehavior rather than to be concerned with what he does.

Roland[2/] argues in the same vein, when she says:

> The teacher is not expected to be a psychotherapist and be responsible for treating and correcting every problem which appears in her room. She can, however, use the clinical point of view in recognizing that a child's problem behavior is not an end in itself, but an open declaration of his conflicts and often his negative way of asking for help.

In the Final Report of the New Jersey Juvenile Delinquency Commission[3/] we find the statement:

> When they (children) transgress it is because they are confronted with a situation which they lack judgment to solve in any other way or because they are expected to comply with adult rules which mean nothing to them in terms of their own understanding.

Much of the traditional school discipline was of the type imposed by the school and was meaningless to the child.

1/ Norman Fenton, op. cit. p. 124

2/ Mary C. Roland, op. cit. p. 26

3/ Justice and the Child in New Jersey, Final Report of N. J. Juvenile Delinquency Commission, Trenton, N.J. 1939 p. 111

Many of the studies dealing with symptoms of maladjustment list truancy as an outstanding factor. The New York Crime Commission Report[1/] contains this quotation,

> One of the first overt acts of the delinquent is truancy. Frequently a problem child is retarded, his status produces dissatisfaction, then impudence, punishment, and finally rebellion in the form of truancy. During truancy various contacts, habits, and attitudes are formed which lead him to violate the law. Delinquency then is only an extreme form of the problems faced daily by every teacher in the classroom.

Baker[2/] believes that the reason teachers manifest so much emotion over discipline problems is that

> They are frequently felt to be a personal failure on the part of the teacher, reflecting upon her ability and tearing down the morale of her classroom.

If she is confronted with a child who cannot conform because of a visual or auditory difficulty, she has no such reaction. Many teachers even get a great deal of satisfaction from being able to help the physically handicapped child make his adjustment.

1/ New York Crime Commission Report, Albany N. Y. J. B. Lyon Co., Pub. 1930 p. 375

2/ Harry J. Baker, "The Education of Behavior Problem Children", Journal of Educational Sociology, 6:368, February 1933

VII. EARLY INDIVIDUAL TREATMENT

In the same manner says Dr. Glueck,[1]

> Youngsters who present behavior difficulties should be studied clinically and given adequate supervision as soon as possible after the appearance of symptoms of maladjustment. Obviously, the more plastic the age, the more promising are the results of the treatment. Society has too patently been neglecting the early danger signals of personality adjustment and of criminality in not providing adequate school-clinic facilities for the study and treatment of problem children, a sufficient number of "special classes" in the school system, extensive visiting teacher programs, other means of guidance, and additional room in the schools for the feebleminded.

In the National Education Association Research Bulletin[2] the first step listed in crime prevention is to make special provision for the problem child, or potential delinquent. This does not mean that the problem child should be removed from the regular classroom and placed in a special class or school. Much of the benefit of remedial and special classes is lost when they become a "dumping ground" for the behavior problems. The child becomes resentful at being placed with the slow-learning and retarded children or with those having some other disabilities. In turn he shows his resentment by other overt acts

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1/ Sheldon Glueck and Eleanor T. Glueck, One Thousand Juvenile Delinquents, Harvard University Press, Cambridge, 1934 p. 277

2/ National Education Association Research Bulletin, Crime Prevention Through Education, 10:171 Sept. 1932

of aggression, until it becomes a vicious circle with the child as the loser.

In St. Paul[1/] it was found that the great majority of referrals were for truancy and the causes of the truancy were academic maladjustment or specific educational disabilities.

Hill's[2/] work with offenders led him to believe that the reason most offenders left school earlier than the average was because the school experience was not significant enough to make a distinct and lasting impression on him.

Recently the writer was discussing discipline problems and problem children with a classroom teacher who made the comment that she never had any problems in her classes, yet her classes were notoriously out of control by any standards. Another teacher who is of the traditional school, has been complaining for years that about ninety per cent of the pupils in her classes are problems of some kind. These instances are cited to illustrate the different points of view of teachers who are coming in contact with some of the same pupils. One recognized no abnormalities and the other saw almost nothing but deviations. She was

one's own point of view

1/ Katherine Lenroot, op. cit. p. 13

2/ George E. Hill, op. cit. pp. 558-559

irritated by such trivial incidents as a chair scraping on the floor, a child bumping into a table or chair, dropping a pencil or book and so on. This is the type of teacher to whom Wickman[2/] was referring, when he said,

> Teachers recognize so many deviations of conduct that they become dulled to individual problems.

He also found that the teachers who reported the most behavior problems in the groups were usually disliked by most of the children in their groups.

Martin[1/] found that children were less disturbed emotionally by the treatment they received, if it were constant. Even the attitude of rejection on the part of the parents was less difficult for the child, if that attitude were maintained. When the parent was affectionate to the point of indulgence one day and rejected the child the next day, the child became unbalanced emotionally. The same facts hold true for the child-teacher relationship. The attitude should be fairly constant, so that the child knows what to expect.

In recent studies there seems to be a general agreement that the personal relationship between the teacher and pupil is one of the strongest factors in the child's adjustment.

1/ Alexander Reid Martin, "A Study of Parental Attitudes and Their Influence Upon Personality Development", Education, June 1943, p. 63

2/ E. K. Wickman, op. cit. p. 58

Appel[1/] expresses the idea very well, when she says that the teacher's attitude should be neither sentimental nor coldly impersonal, but one of genuine warm friendliness, a true interest in the child and his welfare. Each child needs personal treatment. It is impossible "to treat all children alike" and be fair. There should be a different type of reaction on the part of the teacher toward the overly aggressive child and the quiet, withdrawing child.

Bratton[2/] suggests that the wise teacher will "occasionally give a thought to the silent, brooding lad who never causes her a moment's trouble." She will seldom, if ever, scold him. Usually this type of child is miserable enough as it is. He is often the potential victim of dementia praecox, if he is not drawn gently out of the shell which he has built up around himself as a protection.

A lack of concern for the maladjusted, underprivileged, and handicapped does not cause delinquency, but it is a contributing factor. The needs and problems of youth cannot be solved in mass, but must be dealt with on an individual basis. Many youths have the same problem, but

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1/ Madeleine Hunt Appel, "Aggressive Behavior of Nursery School Children and Adult Procedures in Dealing with Such Behavior", Journal of Experimental Education 11:199 Dec.1942

2/ Dorothy Bratton, "Classroom Guidance of Pupils Exhibiting Behavior Problems", Elementary School Journal 45:287 Jan. 1945

in the last analysis they must be worked out personally and individually. This is the idea expressed in the Massachusetts Youth Study Report.[1]

Barbour[2] is convinced that the heart of good guidance lies in the human relationships which exist in every classroom and in every school. Guidance is a matter in which every teacher, administrator and supervisor participates daily. The forward-looking school systems are providing specialized services to help teachers and administrators meet increasing problems of pupil adjustment.

Again referring to the National Education Association Research Bulletin, Crime Prevention Through Education,[3] the following suggestions are made as to ways in which the school can help:

1. Through the establishment of research bureaus to study child behavior
2. By the improvement of each classroom situation, so as to reduce pupil maladjustment
3. Full co-operation with juvenile court authorities

1/ Massachusetts Youth Report Relating to the Education and Employment of the Youth of the Commonwealth of Massachusetts.

2/ Richmond Barbour, "The Organization of Guidance Service in a City School System", California Journal of Elementary Education 14:213 May 1946

3/ National Education Association Research Bulletin, Crime Prevention Through Education 10:183 September 1932

In the Strayer Report of a Survey of the Public Schools of Boston, Massachusetts[1] we find this statement in regard to finding the child who is in need of help.

> This does not consist of a passive waiting for problems to become evident or a waiting for referrals after difficulties have arisen. It must be an active planned process directed toward the end that no child shall suffer unnecessary maladjustment or failure to reach his highest potentialities of educational, physical, spiritual, or social growth through any failure actively to search out any factors in him or in his home or educational environment which may impede or obstruct such growth.

VIII. NEED OF DEFINITE PROGRAM

It is evident in the light of all that has been said about delinquency that to cope with it successfully, a definite program will have to be set up. Past experience tends to show that it cannot be left to the initiative of the classroom teachers, most of whom have not had the training necessary to efficiently handle the problem. Baker[2] sums it up in these words:

> There is no inherently mysterious problem which has not been solved, except that of finding out how to evolve a more understanding and comprehensive program and put it into operation on a large scale.

1/ George D. Strayer, Report of a Survey of the Public Schools of Boston, Mass., City of Boston Printing Department, 1944 p. 529

2/ Harry J. Baker, "The Education of Behavior Problem Children", Journal of Educational Sociology 6:370 February 1933

Hill[1] lists five fields of special effort on the part of the school.

1. Curriculum revision--more subjects that have significance.

2. Diagnosis and treatment of behavior problems--understanding of the basis of difficulty.

3. Early treatment--elementary school and junior high school.

4. Recreational activities--elementary boys and girls should learn to participate and school facilities should be made available after school hours.

5. Character outcomes--acknowledgment of right and wrong; practice in doing right, motivation to do right.

Within recent years we have heard much about curriculum revision. At least an attempt is being made to fit the curriculum to the needs of a larger group of children. The old traditional school had only those pupils having the higher I. Q.'s who were capable of using the higher mental processes. When a child could not meet the requirements of the classical or college preparatory course, he dropped out of school, sometimes after considerable struggle and heartbreak.

1/ George E. Hill, op. cit. p. 560

Compulsory attendance laws made it requisite that these slow, dull children remain in school. We found them repeating year after year until the compulsory age was reached. Many of the more aggressive type became so badly maladjusted that they came in contact with the law and their education was completed in a penal institution.

In writing of a study carried on among the inmates of a juvenile detention school, Hoyt[1/] says,

> The investigators after careful observations attributed this maladjustment largely to the type of education received. Their conclusion is that there should be a complete reversal of the all too prevalent policy of attempting to force all boys through the same educational process.

He goes on to say that the San Quentin faculty states that there should be numerous tests given in school to see what "makes people tick", thus striving for prevention through correct education.

The more progressive school systems have recognized that not all children can be expected to attain the scholastic levels of the potential college student. This situation is handled in several ways, by means of special marks that indicate satisfactory attainment for that particular child, a special certificate upon the completion of the minimum essentials of the course or completion of

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1/ H. H. Hoyt, "Juvenile Delinquency in Times of Social Change", The Social Studies, 34:162, April 1943

a special curriculum set up for the slow learning and retarded children.

IX. SCHOOL GRADES

The system of no grades in the usual sense, sounds simple, but here again the personality of the teacher enters into the picture.

In a school system where the writer taught, grades of "Satisfactory" and "Unsatisfactory" were given. Two other marks were given to indicate irregularities. One of the marks was to indicate a degree of attainment lower than the child's capacity. The other indicated that the child was working to capacity, but was not achieving up to grade level. Since the marks were subjective, based entirely on the teacher's judgment, the plan was not successful. If intelligence quotients could have been obtained for the doubtful pupils, much of the subjectivity could have been eliminated. After trying several variations of the plan, the school has returned to the traditional plan of "1", "2", "3", "4" and "5".

The idea is often expressed that grades are not important, but in reviewing studies of delinquents, it is evident that grades are at least a factor. In a study conducted by Hill[1/] it was found that few boys in the

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1/ George E. Hill, "Educational Attainments of Young Male Offenders", Elementary School Journal, 36:55 September 1935

correctional school had gone beyond the eighth grade and only 13 per cent beyond the first year of high school. In every case, the level of achievement was below the grade of attainment. The scholastic ratings based on teachers' marks were: good records, 8 per cent; fair records, 45 per cent; poor records, 47 per cent. Only 14 per cent had never failed; 50 per cent had failed some courses and 35 per cent had failed often. The causes of failure were listed as low intelligence, lack of interest, excessive absence, indifference, lack of effort, and poor home surroundings.

The same facts as to school failure are reported in practically every study of delinquents or criminals, only the details differ. It would seem that the greatest number of casualties are in the ranks of the dull normal and borderline.

In an article, "High School Methods with Slow Learners"[1/] is the statement,

> If the slow learner attempts to keep up with the average, he is under more pressure, hence, may become more worried, excited, over-sensitive, shy, apathetic, lazy, dishonest, rebellious, or vicious. Before saying he is emotionally abnormal, the school should be sure that the symptoms are not due to physical disabilities or lack of adjustment between his abilities and the demands of the school, or out of school environment.

1/ National Education Research Bulletin, "High School Methods with Slow Learners", 21:62 October 1943

X. ADJUSTMENT SERVICES

All studies seem to show that the school program is vital in the adjustment of some children. Of equal importance, and working hand-in-hand with the classroom teacher, should be the adjustment services which understand and diagnose the maladjusted behavior. This is followed by the treatment, which to be really effective, must take place in the elementary school or not later than junior high school.

This phase of the work as it is usually set up, consists of the visiting teacher, psychologist, social worker and, if the difficulty is severe, the psychiatrist. Programs of this type will be discussed in the following chapter on the basis of information received through personal correspondence from the guidance department of thirteen cities in the United States.

Community agencies and recreational facilities will not be discussed in this thesis. Daly[1/] has given an excellent discussion of the part that planned recreation can play in the prevention of delinquency, especially

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1/ Francis J. Daly, Maladjustment and Delinquency: The Responsibility of Large Urban School Systems for Certain Aspects of their Control, Unpublished Master's Thesis, Boston University, School of Education 1943, pp. 144-146

as applied to the Boston area.

In the light of the studies reviewed, it would seem that there is considerable agreement on certain phases of early detection of maladjustment and delinquency. Authorities in this field seem to agree that it is entirely possible to detect deviations by means of certain traits, characteristics, and symptoms in evidence in the classroom, as follows:

1. Retardation and failure.
2. Truancy and unnecessary tardiness.
3. Petty stealing, cheating, and lying.
4. Group misfit; shy, solitary, over-aggressive or hyper-active, unpopular with other children.

Any of the above symptoms should warn the classroom teacher that the child is maladjusted. When these symptoms appear in combinations, and especially when it is evident that the child's home is of low standard, the child is in need of help.

The manner in which this help can be given will be discussed in the following chapter in the light of what is being done in thirteen of the large school systems in the United States.

CHAPTER III

SUMMARY OF THE MATERIAL COMPILED FROM THIRTEEN LARGE CITIES WORKING IN THE FIELD

As stated in the previous chapter, the organization of guidance and adjustment services in twelve large cities of the United States will be studied in an attempt to discover what means are being used to sensitize the classroom teacher to the beginnings of maladjustments.

A letter (see Appendix Exhibit A) was sent to the Director of Guidance in each of twelve school systems asking what means were used to sensitize the classroom teacher to the beginnings of maladjustments among her pupils and also how successful the method seemed to be.

The material received from these twelve school systems will be reviewed in an attempt to answer these two questions.

Seattle, Washington, is one of the school systems that has a very detailed program, offering many services to the classroom teacher. Quoting from a letter received by the writer from the Director of Guidance,[1/] she says,

> First, we offer, through the Guidance Department, courses for teachers in Mental Hygiene, Tests and Measurement, Growth and Development, Causes for Delinquency and Maladjustments, etc.

1/ Personal correspondence of the writer, letter from Virginia Lee Block, February 19, 1947

size of family and sibling position important ← *

Second, the Guidance Department works closely with all classroom teachers through the city surveys which teachers give but which are under the supervision of the Guidance Department. Interpretations of the results of group tests are made by the Guidance Department to teachers through the system. Any aberrations from the normal on the emotional, social, physical, or academic levels are called to the attention of the teachers, and emphasis is placed upon the causes underlying these behavior patterns.

Mimeographed bulletins are sent to the teachers explaining the services offered by the Guidance Department and also instructions for the use of the various forms of referral. In 1939, groups of principals, advisers, counselors and members of the Guidance Department met to discuss suggestions which had been made in part by the classroom teachers for revising the referral form.

The purpose of this form is:

1. To give the psychologist an idea of the reason for referral.

2. To give the psychologist a picture of the child which aids her during the testing.

3. To aid in verifying pertinent data such as date of birth, size of family, etc.

4. To give the Child Guidance Department the school's point of view previous to the interview with the parents, enabling the social worker to gain rapport with the parents and attack the problem more intelligently.

In most schools it is the accepted practice to have the teacher, nurse and principal confer before the referral form is filled out. All teachers who have the child for any class are called in for the conference. This conference in itself has been known to bring about a better understanding of the child.

Confidential material regarding the case may be telephoned to the Guidance Department or written separately and then put in the confidential files of the Department.

The recommendations from the Guidance Department are made in the form of suggestions to the school or agency on the basis of the information that the Department has. It is left entirely to the discretion of the school principal or agency to carry out the recommendations. The Guidance Department is anxious to discuss any recommendations over which there may be a difference of opinion.

The referral form, called the Clinical Picture, gives the personal data about the child, also the information about his home background, school history, test record, physical examination report, habits, special abilities, likes, dislikes, difficulties, social and emotional adjustment, home conditions (report by social worker), activities in and out of school and other information from interviews. The final sheet is for recommendations. There is a re-referral form to be used, if

the child is referred again within a three-year period. This form is short, containing only the information that will bring the case up to date. There is another form sent out by the Guidance Department during the semester following the first study. This is by way of a check on the child's progress.

In contrast to the elaborate system for referrals in Seattle, Washington, Denver, Colorado, has very little to offer. The program depends on the

> . . . alertness and understanding of good teachers and principals trained in the philosophy and technique of child guidance. 1/

Denver has one teacher who gives full time to Binet testing. Group tests are encouraged and are given by teachers and principals. Very limited assistance is given by the Child Guidance Clinic of the Colorado General hospital. There is no psychological or psychiatric help on the school staff.

The Los Angeles, California, city schools depend chiefly on two methods for in-service training for teachers concerning the beginnings of maladjustment and delinquency. First, a background of "knowledge of the genesis and development of human behavior" is built up through teacher institutes and workshops conducted "partly by lecture and

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1/ Personal correspondence of the writer, letter from Gary Fox, Director, Department of Pupil Personnel, February 1947.

partly by conference method".[1] Small groups using the workshop techniques are composed of teachers who make observations of from one to four children over an extended period of time.

Another method of sensitizing teachers is through the work of the psychological service and clinic counselors. Children who show deviations are given a psychological examination and later the counselor or psychologist gives the teacher the benefit of the findings and recommendations.

In Spokane, Washington, the Director of Guidance[2] states that they have

> . . . no definite formula or plan that permits a teacher to determine delinquency. Most cases of delinquency result from conditions outside the school, and while the alert teacher senses items or incidents of maladjustment we have no pattern formula for her to follow.

The teachers may call in a field social worker who lists the problem under the following headings to determine posibilities of improper adjustment: good idea

1. Emotional Maladjustment
2. Health Conditions
3. Home Conditions
4. Environmental Conditions

1/Personal correspondence of the writer, letter from Elizabeth L. Woods, Supervisor Guidance and Counseling, Elementary Education Division, January 28, 1947

2/ Personal correspondence of the writer, letter from Ralph A. Peterson, Director of Guidance, January 27, 1947

No suggestion is given as to how the cases are handled and apparently, the finding of maladjustments is left to the initiative of the teacher.

San Francisco, California, is another city which conducts in-service training series for the teachers. There seems to be nothing compulsory about the training, but teachers and principals are encouraged to carry along the work of early detection in the schools. The Child Guidance Service is always overloaded with cases which have been referred from the schools.

Santa Barbara would seem to have an outstanding program of child guidance. In the Bulletin of the Guidance Department[1/] is this statement:

> The purpose of the Child Guidance Department, refined through eleven years of experience has become, therefore, an attempt to incorporate in the City Schools the principles of mental hygiene, not fortuitously as has often happened in the past, but in a well-organized pattern which recognizes child growth and development and extends into all aspects of school organization and administration.

The guidance personnel consists of one full-time counselor, and teacher-counselors in the various schools who are relieved of teaching duties regularly each week by a substitute or by their principal. The amount of time given to counseling in each school depends upon the

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1/ Charlotte D. Elmott, "An Analysis of the Services of the Child Guidance Department, Santa Barbara, California, August 1946

needs of that school. These counselors are all trained in child guidance procedures, are competent psychometrists, and have, with one exception, all had training in a clinical setting. The counselors have the responsibility for individual case studies, for arranging with principals for case conferences, for making home visits to secure social data, for conducting individual psychological examinations, etc. They also supervise the group testing program in their schools.

All children entering the Santa Barbara school system for the first time are tested by the counselors as are absentees during the scheduled group tests. The elementary classroom teachers administer and score the achievement tests, but the counselors give the intelligence tests and they are scored by the central office of the Guidance Department. The teachers turn in all tests results and the analysis is worked out in the central office.

From the results of these tests the following research bulletins have been prepared:

Reading and Arithmetic Achievement Grades 3-9

Intelligence Test Results

A Study of Second Grade Achievement

A Study of First Year Reading Achievement

A Study of the Incidence of Mental Deficiency in the City Schools

In the elementary schools the principals are charged with the daily check on causes of absence. Principals may refer special attendance problems to the director of guidance for special study. An attempt has been made during the war years to increase the case conferences and decrease the referrals to the Probation Office. Attendance has improved. In 1944-45, 129 case conferences were held in regard to attendance, while in 1945-46 only 80 such conferences were held.

In all of this work, the emphasis is placed on the individual child.

> The case conference technique seems to provide the best method for helping teachers and social workers to develop objectivity and understanding of the needs of children.1/

It has been found that thoughtful consideration of one child's needs, tends to transfer the "accepting" attitude to other children with similar problems. It is through this means that the school personnel is being trained to recognize and help the child with special problems.

The reasons for referrals have not varied appreciably except that during the war years there was an increase in cases classified as "behavior problems", especially the more aggressive type. In 1939-40 some 18.4% of the cases were classified as behavior, but in

1/ Charlotte D. Elmott, op. cit., section 6

the last two years the number has nearly doubled--34.6% in 1944-45, and 37.8% in 1945-46. These figures also include referrals from the high schools.

Grade placement also receives study in the belief that the child should be placed where he will work most effectively.

In Portland, Oregon, we find the guidance program in the elementary school, under the direction of the principal. It is his duty to enlist the interest and aid of the classroom teacher in the individual pupils and their problems. To enable the teacher to understand the pupils and make her proper contribution, it was felt that the teacher should work with the child for a sufficient length of time to make it possible for her to know the child. A change from departmental work back to the homeroom has been made. Each elementary teacher has one group for half of the day, then the pupils change teachers for music, art, physical education, etc.

Out of this greater understanding of the child has come the Cumulative Record Form. This record is as its name implies, an accumulation of data, information, experiences and recommendations. At three levels--the end of the third grade, sixth grade and during the eighth grade--the results of a principal-teacher conference are recorded and the child's progress is summarized.

It is felt that a good program should be built on the alertness of the teacher and her personality. Stress is laid on good mental health of the teacher who will in turn create in her room an atmosphere that guarantees the pupils being surrounded day by day with good mental health influences.

> The child must feel that those about him have a genuine affection for him--accept him for what he is--little or big, dark or light, beautiful or ugly, crippled or healthy, bright or dull. He must feel like others in his group and be accepted by his peers.1/

The basic personality needs of most children are met through their environment in the home, school and community. However, about 10% of school pupils' needs are not met through these agencies. Their physical make-up, intellectual reactions, behavior patterns and emotional attitudes show various types of symptomatic behavior. The visiting teachers and social workers give special service in the schools to help these children.

A distinction is made between behavior problem children, who are those showing aggressive tendencies, and the personality problems, who are regressive in behavior. The latter type are more easily overlooked, but are likely to be more serious from the mental health view point. When either type is detected and does not respond to the classroom teacher, the visiting teacher is called upon

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1/ Portland Public Schools Handbook of Health and Adjustment Services, Curriculum Bulletin No. 1, 1945

for assistance.

This program is outlined in the Handbook of Health and Adjustment Services. Teachers and principals are asked to study the book and keep it at hand for reference and guidance.

In-service courses carrying college credit are offered, but are not required.

The Director of Pupil Personnel in Milwaukee states:[1/]

> We attempt to acquaint the classroom teacher with the beginnings of maladjustment and delinquency in our pupils by a process of in-service training where these teachers through study groups within each individual school spend an hour of work with and later discussing the techniques of child observation, child study, and child development. We have found that this is by far the most successful way of doing it and for us it has gotten results.

Two books used on the study of maladjusted children are Gertrude Driscoll's How to Study Behavior of Children, Columbia University Press and How Children Develop, an Ohio State University publication of 1946.

Rochester, New York,[2/] has no guidance department and leaves the discovery of anti-social traits in pupils pretty much to the classroom teacher. They have a very

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1/ Personal correspondence of the writer, letter from Irving W. Stout, January 29, 1947

2/ Personal correspondence of the writer, letter from Raymond C. Koeple, Director of Department of Attendance, January 31, 1947

small, inadequate, psychological staff who, in a limited way, try to discover deviations also.

In Detroit, Michigan, the Psychological Clinic is the central agency from which all testing, case work and adjustment come. A regular testing program is carried on, first through group tests followed by individual intelligence tests. Each semester all B first grade pupils are tested for classification. For three days each year 175 teachers who had training in testing assist in examining the B first candidates. The group tests are also given each semester to A fourth, A eighth and B twelfth grades. All pupils new to the system are also examined.

The vocational aptitude testing is semi-group and semi-individual designed to give service on certain maladjusted pupils principally in grades 7-12. These pupils are referred by the schools, by attendance department, by social agencies, by parents or by the pupils themselves.

The psychologists who do the mental testing give half of their time to social case work. Elementary pupils referred for special examination present a variety of problems including mental, physical, and emotional. Recommendations to special classes for the mentally retarded or to classes or schools for the physically

handicapped are made. Social case histories are prepared for all pupils examined individually. This report includes early developmental history, the health history, significant facts with regard to the cultural pattern and status of the family background, and a description of the pupil and his personality development.

Three physicians devote part time to examining all children who have the individual mental tests. Advisory notices of the finding are sent to parents who are encouraged to consult their family physician. Two psychiatrists also serve in an advisory capacity on a part time basis.

mental tests important

The visiting teacher program was set up to assist in the early recognition of behavior difficulties of the following types:

1. Personality difficulties evident in withdrawing and unhappy behavior
2. Failure to accomplish in school commensurate with ability
3. Obvious behavior difficulties and
4. Adverse home conditions

The attention is directed, in the main, toward young children in the elementary school. There is a minimum coverage of the intermediate and high schools.

good

Approximately one-fifth of the children receiving service were already enrolled in the Ungraded Classes where a combination of the Visiting Teacher program and the remedial educational program was designed to reduce delinquency among the most potential candidates from the entire school system.1/

More than three-fourths of the cases studied made good or fair improvement in pupil-teacher relationships with approximately the same number in which the attitude toward the school also improved. Two-thirds of the group made favorable improvement in attendance and scholarship. From two-thirds to three-fourths improved in such traits as reliability, co-operation and sociability. A large majority improved in health.

Quoting from a letter from Dr. Baker:2/

> We have a personality rating sheet for kindergarten teachers to use on all their pupils in about half of the Detroit schools in connection with the program of reading readiness. . . . Our visiting teacher program is concentrating gradually upon younger children.

As might be expected, New York City has a very well-organized program of child guidance. Courses, seminars and workshops are given by members of the Bureau of Child Guidance, but it is felt that,

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1/ Harry J. Baker,"Report of the Psychological Clinic", Detroit Public Schools, 1944-45

2/ Personal correspondence of the writer, letter from Dr. Harry J. Baker, February 3, 1947

> The most significant educational work is the direct product of clinical service. It is through the knowledge gained from clinical evaluation of the individual child that teachers have the best opportunity for gaining insight into the nature of behavior. They are enabled to see at first hand the effects of attitudes and methods of handling in the causation and treatment of emotional disturbances, behavior and personality problems.1/

In service courses offered by the Board of Superintendents aimed to deepen and broaden the teachers' understanding of children's needs and newer ways of meeting them. Two types of approach were used. One focused directly on the needs of individual children at various age levels. This was presented from the point of view of both the teacher and the supervisor. The other approach was through the orientation of teachers to the use of social agencies in meeting the needs of individual children.

Members of the staff participated in many courses given by the other divisions of the school system. Several psychiatrists gave time to courses sponsored by the Board of Health. Cases were presented before groups of graduate students. In these conferences, the findings of the social history, the psychological, physical and psychiatric examination were discussed and a treatment plan worked out on the basis of the discussion.

1/ Bureau of Child Guidance, Annual Report, Board of Education of the City of New York, 1944-45

Much informal interpretation of the work is given over the telephone to parents and teachers and others interested in child adjustment.

Teachers should keep with parents

The most potent factor is felt to be the interpretation to the school personnel of the findings and recommendations made in individual cases. This is done orally and in writing and is followed up in serious cases by continued conferences as the child proceeds from class to class. The teacher's own participation in the conduct of the case is in itself an application of the mental hygiene principles involved. It seems to hold true that what a teacher learns from working with one child, she is able to apply in preventive work with others.

Some schools have evolved their own plans for workshop groups. This is in an experimental stage, but is expected to expand to other schools.

The Bureau attempts, through public relations, to interpret its work to the parents and general public. In March 1945, an exhibit was held showing psychological and psychiatric materials used in examining and treating children, as well as examples of the work of the children. Drawing and paintings by the children accompanied by interpretations of them were displayed. All of this establishes a better relationship between the Guidance Bureau, the teacher and the parents.

The reply from Tulsa, Oklahoma, did not directly answer the questions asked. Two articles on guidance were sent, each one rather general in nature. One by Mildred Stever[1/] discusses the various agencies that are available in Tulsa for help in solving the juvenile problems. Another article by Pauline Chappel Keaton[2/] discusses the Cumulative Record, but does not give the information asked for to answer the questions in this thesis.

The experiences of the Children's Bureau in one district in St. Paul, Minnesota, from 1937-1942, are fairly well-known, but will be mentioned here as they also show what can be done in the matter of early detection.

In attempting to locate maladjusted children as early as possible, the Children's Bureau turned to all organizations who know the children. The school, of course, was foremost among these. Teachers were asked to refer children whose behavior was causing any concern. The police also referred any children whose behavior brought them to the attention of an officer.

At first, mostly older children were referred. During the first year, the median age was thirteen years.

1/ Mildred Stever, "Utilizing Available Resources for Guidance", Our Tulsa Schools, 5:14 December 1946

2/ Pauline Chappel Keaton, "The Cumulative Record", Our Tulsa Schools, 5:15 December 1946

Five years later, in 1942, the median age of referral had dropped to ten years. This indicates that close co-operation between agencies, and an early awareness of difficulties increases the chances of correcting existing problems and preventing future difficulties.

Boston, Massachusetts, has no program for sensitizing the classroom teacher to the beginnings of maladjustment. The Child Adjustment Service attempts to co-operate with the classroom teacher, giving aid wherever it is needed and requested. This on-the-job co-operative work has been quite successful, but its chief drawback is that so few of the problem children receive help until their difficulty has become serious.

Table I. shows the means used by these school systems to sensitize the classroom teacher to the problem. The item "no program" refers to no definite, outlined program. Those cities in each case have some help from clinics, tests, social workers or from other sources. It is undoubtedly true that some of these cities have services that were not specifically mentioned, in which case, they are not included in the table.

The item "in-service courses" is a very broad term also, including actual training courses and also those university extension courses that are on the purely voluntary basis.

TABLE I

MEANS USED TO SENSITIZE CLASSROOM TEACHERS

	In-service Courses	Workshop Groups	Clinical Aid or Direction	Principal-Teacher Conference	Group Testing	Handbook of other Literature	Cumulative Record	No Program
Boston			X					X
Denver			L	X	X			X
Detroit	X	X	X	X	X	X		
Los Angeles	X	X	X	X	X	?		
Milwaukee	X	X	X	?	?	X		
New York City	X	X	X	X	X	?	X	
Portland, Oregon	X	X	X	X	X	X	X	
Rochester, N. Y.			L					X
San Francisco	X	?	X	X	X	?	?	
Santa Barbara	X	X	X	X	X	X	X	
Seattle	X		X	X	X	X	X	
Spokane								X
Tulsa	?	?	X	?	?		X	

L denotes limited service

? indicates no definite information

In the light of the material received from these thirteen cities, it would appear that there is a definite trend toward mapping out a program aimed at early detection of maladjustment.

Eight cities stated that they have in-service training for teachers. These courses vary in nature, but are all stressing the need of greater understanding of child development and behavior. Some cities also offer courses dealing with the detection and treatment of maladjusted behavior. The workshop technique seems to be a newer form of approach. In several instances, it is still in the experimental stage. The workshop groups observe, study and then discuss individuals or small groups of children.

Twelve of the cities have the services of a clinic which either aids in the work or, in some systems, guides the work of detection. There seems to be a great deal of variation in the clinical set-ups and their function. Denver, Colorado, and Rochester, New York, both mentioned having very limited services of a clinical nature. In 1937, Rochester had a fairly extensive department, but the correspondence received by the writer in January 1947, states that, "those schools having a psychological service are in a much sounder position to discover these trends".

He goes on to state that Rochester has only a small group of psychologists. This seeming contradiction or change within the past ten years may be due to war conditions.

Group testing seems to be the primary method of detection in a few systems. Those pupils low on the tests are studied to determine the causes. Detroit, for instance, has a very elaborate program of group testing scheduled for each semester, while Denver encourages the teachers and principals to do group testing. Rochester, New York, Milwaukee, and Spokane did not specifically mention group testing.

Five cities mention the compiling of the cumulative record as an aid to the classroom teacher in detecting maladjustments and interpreting behavior.

Three cities definitely state that they have no program of detection, that the classroom teacher is relied upon to discover the deviations. In the correspondence from Spokane, the statement was made that most delinquency originates outside the school, so apparently the school does not feel too concerned about it. The Director of the Department of Attendance in Rochester presumes that in most schools in the United States, the discovery of anti-social traits is left pretty much to the classroom teacher. In Denver, the detection of maladjustment depends on the alertness and understanding of good teachers and principals

trained in the philosophy and techniques of child guidance. With no other interpretation, it is impossible to know just how much training and what type of training the principals and teachers have. There is only one teacher who gives full time to Binet testing.

Boston and Seattle would appear to have the most elaborate referral forms.

CONCLUSIONS

From the sampling taken in various parts of the United States, it would seem that much remains to be done, if the schools are to effectively play their part as the greatest of child training organizations. The schools belong to the people and, as such, should serve all of the children of all of the people. This can be done only by careful attention to every child's individual needs. The school has no right to rest until its program meets the needs of 100% of the school children. All children whose needs are not met by the regular classroom instructor are deserving of special education.

To be efficiently handled, these classes must necessarily be small; in the case of physically handicapped children in a hospital or at home, the instructor is for one child at a time. The expense may seem great, but in terms of the future citizen, it is small. If by

this means we can develop self-sufficient, well-adjusted individuals who are not going to be dependent on the taxpayers through the remainder of their lives, the cost is small.

The various services should be very closely integrated and "red tape" cut to a minimum. Much valuable time is lost waiting for the referral to go through proper channels until it reaches someone who has the authority to approve the case for investigation. Often the investigation, numerous forms and records, take so long to complete that the child has been irreparably harmed.

Adequate diagnosis and analysis of the case are necessary, so that true understanding will form the basis of treatment. Each department,--health, social work, psychological, and educational--should contribute its share of help. In this way, a balanced program of treatment may be achieved through a central guidance department.

CHAPTER IV

SUGGESTIONS FOR FURTHER STUDY AND RESEARCH

1. In the course of this study, various avenues of investigation have presented themselves. Stubbornness as a personal characteristic is a trait that seems to suggest further study. Just what causes it and what are some of the most effective ways of handling the common classroom evidences. The stubborn child is perhaps one of the most difficult to handle in a positive fashion.

2. The material received from the field suggests further investigation as to the amount of actual carry-over from a lecture course on behavior problems to daily living.

3. It would seem that there is need of further study of a working relationship between the teacher and the social worker. At the present time, there is lack of understanding and professional jealousy. How can the teacher be given the view point of the social worker and the social worker, in turn, be made to understand the educational problem.

4. It would seem that further study is needed on the problem of the highly neurotic and psychotic teacher as a factor in the maladjustment of school children. By what means is it possible to dismiss such a teacher without

doing further harm to them or to the children concerned.

5. Investigation seems to show that parents and teachers recognize, and are disturbed by, different types of behavior problems. Further study might be done to determine whether this difference in standards is a contributing factor in maladjustment.

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APPENDIX

EXHIBIT A

COPY

334 Bay State Road
Boston, 15, Mass.
January 25, 1947

Director of Child Guidance
Public Schools
Denver, Colorado

Dear Sir:

For my Master's thesis in Boston University School of Education, I am trying to find what means various school systems use to sensitize classroom teachers to the beginnings of maladjustment and delinquency among their pupils.

Would you please tell me of the plan employed in your system and how successful does it seem to be? If you use any printed forms, would it be possible to secure a copy?

I shall sincerely appreciate any information that you care to give.

Very truly yours,
(Signed) HELEN A. PRINCE
Helen A. Prince

COPY

SEATTLE PUBLIC SCHOOLS
Guidance Department
810 Dexter Avenue
Seattle 9, Washington

Virginia Lee Block, Director

February 19, 1947

Miss Helen A. Prince
334 Bay State Road
Boston, 15, Massachusetts

Dear Miss Prince:

I hardly know how to answer the questions that you raised in a letter. To actually give you a picture of the manner in which we try to sensitize our teachers to the beginnings of maladjustments would require a young thesis. I am, therefore, just merely going to outline to you some of the things we do.

First, we offer, through the Guidance Department, courses for teachers in Mental Hygiene, Tests and Measurement, Growth and Development, Causes for Delinquency and Maladjustments, etc.

Second, the Guidance Department works closely with all classroom teachers through the city surveys which teachers give but which are under the supervision of the Guidance Department. Interpretations of the results of group tests are made by the Guidance Department to teachers through the system. Any aberrations from the normal on the emotional, social, physical, or academic levels are called to the attention of the teachers, and emphasis is placed upon the causes underlying these behavior patterns.

Each school is acquainted with the Clinical Picture which teachers fill out for children whom they wish to refer to the Guidance Department for study. These Clinical Pictures demand a careful analysis of the total child. Many schools use these for their own analyses of their children whom they do not send for help to the Guidance Department.

Under separate cover I am enclosing a copy of our Clinical Picture, the follow-up sheet, and directions. To give you an illustration of what we mean by the City Survey we are sending you an analysis blank of our 4B reading survey.

Sincerely yours,

(Signed) VIRGINIA LEE BLOCK

Virginia Lee Block
Director
Guidance Department

VLB:mmi